

THE  
CONSTITUTION AND BY-LAWS  
OF THE  
CLARK COUNTY MEDICAL ASSOCIATION.

TOGETHER WITH A

TABLE OF FEES.

AND

CODE OF MEDICAL ETHICS.

ADOPTED

*January 26, 1867.*

—ALSO—

AN ADDRESS DELIVERED BY F. R. PAYNE, M. D.

PUBLISHED BY THE SOCIETY.

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MARSHALL, ILLINOIS:  
SUTTON & ENGLISH, PRS.—MESSENGER OFFICE.  
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CONSTITUTION AND BY LAWS

BLACK LUTHERAN BROTHERHOOD ASSOCIATION

JOURNAL OF THE

PROCEEDINGS OF THE

ANNUAL CONFERENCE

HELD AT THE CITY OF NEW YORK, N.Y.



# CONSTITUTION.

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## SECTION I.

ART. 1. This society shall be called the CLARK COUNTY MEDICAL ASSOCIATION.

ART. 2. This society shall hold four stated meetings annually, called annual and quarterly. The annual meeting shall be held the first Wednesday, of January, and the quarterly meetings the first Wednesdays of April, July, and October.

ART. 3. This society may adjourn from day to day, but shall meet at all regular or called meetings, in Marshall, Illinois.

ART. 4. For the election of officers at the annual meeting, or election of members to the Society, seven shall constitute a quorum, but for other purposes, five members shall constitute a quorum.

When the President has declared the meeting opened, the order of business shall be as follows:

1. Reading of the minutes of the last meeting, and correcting the same, if necessary.
2. Calling the roll of members.
3. Appointment of the usual Committees, and Treasurer's report.
4. President's Address.
5. Report of Committees, and questions relative to taxation.
6. Reading of such papers (essays, etc.,) as have been directed by the Society.
7. Report of cases and other communications from the members of the Society.
8. Election of officers.
9. Miscellaneous business, motions, resolutions, notices, &c.
10. Each member, when speaking, shall rise and address the President, and when called to order by any member, shall set down.
11. On questions of order, the members shall have the right of appealing from the decision of the President to a vote of the society.

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## SECTION II.

ART. 1. The officers of this society shall be a President, Vice President, Secretary and Treasurer, and five Censors, chosen by ballot at the annual meeting, and shall hold their offices for one year, and until successors shall have been chosen.

ART. 2. Vacancies may be filled at any regular meeting, or the President may appoint Censors pro-tempore in case of absence.

ART. 3. Delegates to represent this society in the State Society, and National Association, shall be chosen at the annual meeting in January.

## SECTION III.

### DUTIES OF OFFICERS.

ART. 1. It shall be the duty of the President to preside at all

meetings, to preserve order, regulate debates, put questions, give the casting vote, call special meetings, and perform such other duties as may hereafter be assigned to him.

ART. 2. He shall appoint the Chairman of all Committees, unless otherwise ordered by special resolution, and deliver before the Society, at the expiration of his term of office, a dissertation on some appropriate subject, or in case of necessary absence, send the same to the society at the time aforesaid, and for neglecting or refusing to comply with the same, shall forfeit and pay to the Society the sum of two dollars, which may be returned by a vote of two-thirds of the members present, at the next meeting of the society, if satisfactory excuse be rendered.

ART. 3. He shall also appoint one of the members to deliver a public address at the annual meeting of the society, and a business committee of three, to select subjects for essays and reports. He shall also appoint the chairman for the standing committees, (except the committee of publication,)—each chairman having the right to select two members to assist him in the discharge of the duties assigned him.

ART. 4. The Vice President shall perform all the duties of the President in his absence, and if neither are present, the society shall appoint a President pro-tem.

ART. 5. It shall be the duty of the Secretary to keep a faithful record of all the proceedings of the society, keep a list of all the members, and preserve the books, papers, essays, and communications belonging to the society.

ART. 6. The Secretary shall, also, at each meeting, report to the society a list of delinquents, and keep a record of fines unpaid, with the reason therefor—shall present a copy of the reason to the members fined, and a list of all to the treasurer. He shall manage the correspondence of the society, and make a report of the same at the meetings of the society, and perform such other duties as may by law be assigned to him.

ART. 7. The Treasurer shall receive and disburse the funds of the society. He shall keep a true account of all moneys received, and pay them out, by vote of a majority of the members present, at any stated meeting, and report the same at each regular meeting of the society, and at the close of his official term, shall deliver to his successor the records of his office, and all the moneys belonging to the society.

ART. 9. It shall be the duty of the Censors to examine the credentials of persons applying for membership, and subject such applicants to examination when deemed necessary, and report the same to the society, at their earliest convenience.

ART. 9. The approbation of three censors shall be requisite to present an individual for admission.

## SECTION IV.

### MEMBERS.

ART. 1. Any Physician approved by the censors, having made application for admission to the society, and received the votes of two-thirds of the members present at any regular meeting, on paying his

initiation fee of \$3.00 and signing the constitution, shall be admitted to full membership.

ART. 2. The expenses of the society shall be defrayed by subscription, or equitable tax, to be assessed at the annual meeting of the society.

ART. 3. Every member residing within twenty miles of the place of meeting, who shall fail to attend at least one of the stated meetings during the year, shall be fined one dollar. The society may remit the fine on satisfactory reason being given for non-attendance.

ART. 4. Any member who shall refuse to pay the taxes and fines regularly imposed upon him, when requested by the proper officer, for two years in succession, shall be suspended from membership, nor shall he be restored till he pay all arrears due from him, and an entrance fee of one dollar.

ART. 5. At each meeting, one or two subjects shall be selected by the society for discussion.

ART. 6. Every member is expected and requested to give a written or oral report, of all important cases that he may treat during the interval of meetings, also any valuable fact he may find recorded in Medical journals.

ART. 7. No member shall be permitted to give the names of persons who may apply for membership, except to the censors, or members of the society; and in no case shall the rejection of an applicant be made public.

ART. 8. Members shall be liable to censure, suspension, fine or expulsion, for wilful neglect of the rules of the society, or flagrant violations of professional etiquette or honor. A vote by ballot of two-thirds of the members present shall be required to expel.

ART. 9. When a motion is made to expel a member, it shall be done at a regular meeting, and the charges brought against him shall be reduced to writing, and a copy furnished immediately by the Secretary to the accused, who shall be allowed until the next meeting to prepare his defence, at which time the motion shall be considered and decided upon.

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## BY-LAWS.

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ART. 1. The code of "Medical Ethics" adopted by the "American Medical Association," in May, 1847, is hereby declared to be the Code of Medical Ethics of this society, and as such, is binding on all its members.

ART. 2. When two or more members rise at once, the President shall name the member who is first to speak.

ART. 3. No person shall speak more than twice on the same question without leave of the society, nor more than once, until every member choosing to speak, shall have spoken.

ART. 4. No question, on a motion, shall be debated or put, until the same shall be seconded. When a motion is seconded, it shall be stated by the President before debate, and every such motion shall be



reduced to writing, if any member desire it.

ART. 5. After a motion is stated by the President, it shall be deemed to be in possession of the society, but it may be withdrawn at any time before amendment or decision.

ART. 6. No member shall interrupt another while speaking, unless it be to call him to order, or, to correct a mistake.

ART. 7. When a question is under debate, no motion shall be received, unless, 1st, to amend it; 2d, To commit it; 3d, To lay it on the table; 4th, To postpone it; 5th, To adjourn.

ART. 8. A motion to lay on the table shall be decided without debate.

ART. 9. A motion to adjourn shall always be in order, and shall be decided without debate.

ART. 10. A second amendment shall not be received until a previous one is disposed of, except with the consent of the mover of the first amendment.

ART. 11. If the question in debate contain several points, any member may have the same divided in voting.

ART. 12. Every member shall vote upon a question put, unless excused by the society.

ART. 13. A member called to order, shall immediately sit down unless permitted to explain, and the society, if appealed to, from the decision of the President, shall decide on the call, without debate.— If there be no appeal, the decision of the President shall be submitted to.

ART. 14. When a question has been put and decided, it shall be in order for any member who voted in the majority to move for a reconsideration thereof; but no motion for reconsideration shall be received more than once, except by unanimous consent.

ART. 15. All motions shall be put in the order they are moved, and shall be reduced to writing, if required by any member.

ART. 16. Any member who shall have attained the age of sixty years, shall be exempt from taxes and fines, and penalties for non-attendance.

ART. 17. No member shall engage in manufacturing, vending or using, in his practice, any nostrums, patent or secret medicine, or holding consultations with known quacks or imposters.

ART. 18. Any of the above laws may be suspended for a specific purpose at any of the stated meetings of the society, by a vote of two-thirds of the members present.

ART. 19. These By-Laws shall not be altered or amended except at an annual meeting, after notice of such intention shall have been given at some previous meeting.

ART. 20. There shall be an annual assessment of fifty cents upon each member, to defray the incidental expenses of the society.



## TABLE OF FEES.

All bills due when services are rendered and cease to be necessary, and must be settled either by note or cash January and July of each year. We, whose names are appended, pledge ourselves to be governed by the following Fee Bill. Constitution, By-Laws, and Code of Medical Ethics. We further agree that we will not attend a patient who is able, yet refuses to pay his bill, and that we will report quarterly the names of this class of customers, that all medical men in the community may become familiar with their names and govern themselves accordingly:

### MEDICAL FEE BILL.

Visits in town, per day, .....	\$ 1 50
Each subsequent visit, same day, .....	1 00
Prescriptions at office, ordinary cases, .....	from 50 to 2 00
"    "    "    chronic    "    .....	" 2 00 to 5 00
Visit in the country, one mile, .....	2 00
Each additional mile, .....	50
Natural case of obstetrics, within four miles, .....	7 00
Call visits in country, .....	1 50
Unnatural labor with false presentation, .....	15 00
Twins, .....	from \$7 00 to 14 00
Instrumental delivery, .....	20 00
Removing adhered afterbirth, .....	5 00
Abortion, same as full time, .....	7 00
Council fee, exclusive of mileage, .....	5 00
Night visits, 50 pr cent additional, and if very bad weather	100 pr ct.

### SURGICAL FEE BILL.

Amputation of Hip joint, .....	\$100 00
Amputation of thigh, .....	50 00
Amputation of leg, .....	40 00
Amputation of arm, .....	30 00
Amputation of fingers and toes, .....	from \$5 00 to 10 00
Reducing fracture thigh, .....	30 00
Reducing fracture leg, .....	from \$10 00 to 20 00
Reducing fracture fore arm, .....	10 00
Reducing dislocation shoulder, .....	from \$5 00 to 10 00
Reducing dislocation hip joint, .....	from \$10 00 to 40 00
Reducing dislocation knee, .....	10 00
Reducing dislocation elbow, .....	from \$10 00 to 20 00
Reducing Hernia by taxis, .....	20 00
Reducing Hernia by operation, .....	50 00
Tapping for Hydrocele, .....	10 00
Tapping for Acities, .....	10 00
<del>25</del> Visits in above for radical cure charged additional.	
Operation for Hair lip, .....	20 00
Excising Tonsils, .....	10 00
Lancing abscess, .....	from 50 cts to 2 00
Introducing Catheter, .....	2 00
Vaccinating, .....	50
Extracting Teeth, .....	50
Bleeding, .....	1 00
For attending Coroner's inquests and all cases where legal testimony will be required, .....	from \$20 00 to 30 00

# CODE OF MEDICAL ETHICS.

## CHAPTER I,

### OF THE DUTIES OF PHYSICIANS TO THEIR PATIENTS, AND OF THE OBLIGATIONS OF PATIENTS TO THEIR PHYSICIANS.

#### ART. 1.—*Duties of Physicians to their Patients.*

§ 1. A physician should not only be ready to obey the calls of the sick, but his mind ought also to be imbued with the greatness of his mission, and the responsibility he habitually incurs in its discharge.— Those obligations are the more deep and enduring, because there is no tribunal other than his own conscience to adjudge penalties for carelessness or neglect. Physicians should, therefore, minister to the sick with due impressions of the importance of their office; reflecting that the ease, the health, and the lives of those committed to their charge, depend on their skill, attention, and fidelity. They should study, also, in their deportment, so to unite tenderness with firmness, and condescension with firmness, as to inspire the minds of their patients with gratitude, respect, and confidence.

§ 2. Every case committed to the charge of a physician should be treated with attention, steadiness, and humanity. Reasonable indulgence should be granted to the mental imbecility and caprices of the sick. Secrecy and delicacy, when required by peculiar circumstances, should be strictly observed; and the familiar and confidential intercourse to which physicians are admitted in their professional visits, should be used with discretion, and with the most scrupulous regard to fidelity and honor. The obligation of secrecy extends beyond the period of professional services; none of the privacies of personal and domestic life, no infirmity of disposition or flaw of character observed during professional attendance, should ever be divulged by him except when he is imperatively required to do so. The force and necessity of this obligation are indeed so great, that professional men have, under certain circumstances, been protected in their observance of secrecy by courts of justice.

§ 3. Frequent visits to the sick are in general requisite, since they enable the physician to arrive at a more perfect knowledge of the disease—to meet promptly every change which may occur, and also tend to preserve the confidence of the patient. But unnecessary visits are to be avoided, as they give us less anxiety to the patient, tend to diminish the authority of the physician, and render him liable to be suspected of interested motives.

§ 4. A physician should not be forward to make gloomy prognostications, because they savor of empiricism, by magnifying the importance of his services in the treatment or cure of the disease. But he should not fail, on proper occasions, to give to the friends of the patient timely notice of danger when it really occurs; and even to the patient himself, when it is ABSOLUTELY NECESSARY. This office, however, is so peculiarly alarming when executed by him, that it ought to be declined whenever it can be assigned to any other person of sufficient judgement and delicacy. For, the physician should be the minister of hope and comfort to the sick; that by such cordials to the drooping

spirit, he may smooth the bed of death, revive expiring life, and counteract the depressing influence of those maladies which often disturb the tranquility of the most resigned in their last moments. The life of a sick person can be shortened not only by the acts, but also by the words or the manner of a physician. It is, therefore, a sacred duty to guard himself carefully in this respect, and to avoid all things which have a tendency to discourage the patient and to depress his spirits.

§ 5. A physician ought not to abandon a patient because the case is deemed incurable; for his attendance may continue to be highly useful to the patient, and comforting to the relatives around him, even in the last period of a fatal malady, by alleviating pain and other symptoms, and by soothing mental anguish. To decline attendance, under such circumstances, would be sacrificing to fanciful delicacy and mistaken liberality, that moral duty, which is independent of, and far superior to, all pecuniary consideration.

§ 6. Consultations should be promoted in difficult or protracted cases, as they give rise to confidence, energy, and more enlarged views in practice.

§ 7. The opportunity which a physician not unfrequently enjoys of promoting and strengthening the good resolution of his patients, suffering under the consequences of vicious conduct, ought never to be neglected. His counsels, or even remonstrances, will give satisfaction, not offence, if they be proffered with politeness, and evince a genuine love of virtue, accompanied by a sincere interest in the welfare of the person to whom they are addressed.

## ART. II.—*Obligations of Patients to their Physicians.*

§ 1. The members of the medical profession, upon whom is enjoined the performance of so many important and arduous duties towards the community, and who are required to make so many sacrifices of comfort, ease, and health, for the welfare of those who avail themselves of their services, certainly have a right to expect and require, that their patients should entertain a just sense of the duties which they owe to their medical attendants.

§ 2. The first duty of a patient is, to select as his medical adviser one who has received a regular professional education. In no trade or occupation, do mankind rely on the skill of an untaught artist; and in medicine, confessedly the most difficult and intricate of the sciences, the world ought not to suppose that knowledge is intuitive.

§ 3. Patients should prefer a physician whose habits of life are regular, and who is not devoted to company, pleasure, or to any pursuit incompatible with his professional obligations. A patient should, also, confide the care of himself and family, as much as possible, to one physician, for a medical man who has become acquainted with the peculiarities of constitution, habits, and predispositions, of those he attends, is more likely to be successful in his treatment, than one who does not possess that knowledge.

A patient who has thus selected his physician, should always apply for advice in what may appear to him trivial cases, for the most fatal



results often supervene on the slightest accidents. It is of still more importance that he should apply for assistance in the forming stage of violent diseases; it is to a neglect of this precept that medicine owes much of the uncertainty and imperfection with which it has been reproached.

§ 4. Patients should faithfully and unreservedly communicate to their physician the supposed cause of their disease. This is the more important, as many diseases of a mental origin stimulate those depending on external causes, and yet are only to be cured by ministering to the mind diseased. A patient should never be afraid of thus making his physician his friend and adviser; he should always bear in mind that a medical man is under the strongest obligations of secrecy. Even the female sex should never allow feelings of shame or delicacy to prevent their disclosing the seat, symptoms, and causes of complaints peculiar to them. However commendable a modest reserve may be in the common occurrences of life, its strict observance in medicine is often attended with the most serious consequences, and a patient may sink under a painful and loathsome disease, which might have been readily prevented had timely intimation been given to the physician.

§ 5. A patient should never weary his physician with a tedious detail of events or matters not appertaining to his disease. Even as relates to his actual symptoms, he will convey much more real information by giving clear answers to interrogatories, than by the most minute account of his own framing. Neither should he obtrude upon his physician the details of his business nor the history of his family concerns.

§ 6. The obedience of a patient to the prescription of his physician should be prompt and implicit. He should never permit his own crude opinions as to their fitness, to influence his attention to them. A failure in one particular may render an otherwise judicious treatment dangerous, and even fatal. This remark is equally applicable to diet, drink, and exercise. As patients become convalescent, they are very apt to suppose that the rules prescribed for them may be disregarded, and the consequence, but too often, is a relapse. Patients should never allow themselves to be persuaded to take any medicine whatever, that may be recommended to them by the self-constituted doctors and doctresses, who are so frequently met with, and who pretend to possess infallible remedies for the cure of every disease. However simple some of their prescriptions may appear to be, it often happens that they are productive of much mischief, and in all cases they are injurious, by contravening the plan of treatment adopted by the physician.

§ 7. A patient, should, if possible, avoid even the friendly visits of a physician who is not attending him—and when he does receive them, he should never converse on the subject of his disease, as an observation may be made, without any intention of interference, which may destroy his confidence in the course he is pursuing, and induce him to neglect the directions prescribed to him. A patient should never send for a consulting physician without the express consent of his own medical attendant. It is of great importance that physicians

should act in consort; for, although their modes of treatment may be attended with equal success when employed singly, yet conjointly they are very likely to be productive of disastrous results.

§ 8. When a patient wishes to dismiss his physician, justice and common courtesy require that he should declare his reasons for so doing.

§ 9. Patients should always, when practicable, send for their physician in the morning, before his usual hour of going out; for, by being early aware of the visits he has to pay during the day, the physician is able to apportion his time in such a manner as to prevent an interference of engagements. Patients should also avoid calling on their medical adviser unnecessarily during the hours devoted to meals or sleep. They should always be in readiness to receive the visits of their physician, as the detention of a few minutes is often of serious inconvenience to him.

§ 10. A patient should, after his recovery, entertain a just and enduring sense of the value of the services rendered him by his physician; for these are of such a character, that no mere pecuniary acknowledgement can repay or cancel them.

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## CHAPTER II.

### OF THE DUTIES OF PHYSICIANS TO EACH OTHER, AND TO THE PROFESSION AT LARGE.

#### ART. 1. *Duties for the support of professional character.*

§ 1. Every individual, on entering the profession, as he becomes thereby entitled to all its privileges and immunities, incurs an obligation to exert his best abilities to maintain its dignity and honor; to exalt its standing, and to extend the bounds of its usefulness. He should, therefore, observe strictly such laws as are instituted for the government of its members; should avoid all contumelious and sarcastic remarks relative to the faculty, as a body; and while, by unwearied diligence, he resorts to every honorable means of enriching the science, he should entertain a due respect for his seniors, who have, by their labors, brought it to the elevated condition in which he finds it.

§ 2. There is no profession, from the members of which, greater purity of character, and a higher standard of moral excellence are required, than the medical; and to attain such eminence, is a duty every physician owes alike to his profession, and to his patients. It is due to the latter, as without it he cannot command their respect and confidence, and to both, because no scientific attainments can compensate for the want of correct moral principles. It is also incumbent on the faculty to be temperate in all things, for the practice of physic requires the unremitting exercise of a clear and vigorous understanding; and, on emergencies, for which no professional man should be unprepared, a steady hand, an acute eye, and an unclouded head, may be essential to the well being, and even to the life of a fellow creature.

§ 3. It is derogatory to the dignity of the profession, to resort to

public advertisements, private cards or hand-bills, inviting the attention of individuals affected with particular diseases—publicly offering advice and medicine to the poor, gratis, or promising radical cures;—or, to publish cases and operations in the daily prints, or suffer such publications to be made; to invite laymen, to be present at operations, to boast of cures and remedies, to adduce certificates of skill and success, or to perform any other similar acts. These are the ordinary practices of empirics, and are highly reprehensible in a regular physician.

§ 4 Equally derogatory to professional character is it, for a physician to hold a patent for any surgical instrument or medicine; or to dispense a secret nostrum whether it be the composition or exclusive property of himself, or of others. For, if such nostrum be of real efficacy, any concealment regarding it is inconsistent with beneficence and professional liberality; and, if mystery alone gives it value and importance, such craft implies either disgraceful ignorance, or fraudulent avarice. It is also reprehensible for physicians to give certificates attesting the efficacy of patent or secret medicines, or in any way to promote the use of them.

#### ART. II.—*Professional services of physicians to each other.*

§ 1. All practitioners of medicine, their wives, and their children while under the paternal care, are entitled to the gratuitous services of any one or more of the faculty residing near them, whose assistance may be desired. A physician afflicted with disease is usually an incompetent judge of his own case; and the natural anxiety and solicitude which he experiences at the sickness of a wife, a child, or any one, who, by the ties of consanguinity, is rendered peculiarly dear to him, tend to obscure his judgment, and produce timidity and irresolution in his practice. Under such circumstances, medical men are peculiarly dependent upon each other, and kind offices and professional aid should always be gratuitously afforded. Visits ought not, however, to be obtruded officiously, as such unasked civility, may give rise to embarrassment, or interfere with that choice on which confidence depends. But, if a distant member of the faculty, whose circumstances are affluent, request attendance, and an honorarium be offered, it should not be declined; for no pecuniary obligation ought to be imposed, which the party receiving it would not wish to incur.

#### ART. III.—*Of the duties of physicians as respects vicarious offices.*

§ 1 The affairs of life, the pursuit of health and the various accidents and contingencies to which a medical man is peculiarly exposed, sometimes require him temporarily to withdraw from his duties to his patients, and to request some of his professional brethren to officiate for him. Compliance with this request is an act of courtesy, which should always be performed with the utmost consideration for the interest and character of the family physician, and when exercised for a short period, all the pecuniary obligations for such service should



be awarded to him. But if a member of the profession neglect his business, in quest of pleasure and amusement, he cannot be considered as entitled to the advantages of the frequent and long continued exercise of this fraternal courtesy, without awarding to the physician who officiates, the fees arising from the discharge of his professional duties.

In obstetrical and important surgical cases, which give rise to unusual fatigue, anxiety and responsibility, it is just, that the fees accruing therefrom should be awarded to the physician who officiates.

#### ART IV.—*Of the duties of physicians in regard to consultation.*

§ 1. A regular medical education furnishes the only presumptive evidence of professional abilities and acquirements, and ought to be the only acknowledged right of an individual, to the exercise and honors of his profession. Nevertheless, as in consultations, the good of the patient is the sole object in view, and this is often dependent on personal confidence, no intelligent regular practitioner, who has a license to practice from some medical board, of known and acknowledged respectability, recognized by this association, and who is in good moral and professional standing in the place in which he resides, should be fastidiously excluded from fellowship, or his aid refused in consultation, when it is requested by the patient. But no one can be considered as a regular practitioner, or a fit associate in consultation, whose practice is based on an exclusive dogma, to the rejection of the accumulated experience of the profession, and of the aids actually furnished by anatomy, physiology, pathology, and organic chemistry.

§ 2. In consultations, no rivalry or jealousy should be indulged; candor, probity, and all due respect should be exercised towards the physician having charge of the case.

§ 3. In consultations, the attending physician should be the first to propose the necessary questions to the sick; after which, the consulting physician should have the opportunity to make such further inquiries of the patient as may be necessary to satisfy him of the true character of the case. Both physicians should then retire to a private place for deliberation; and the one first in attendance should communicate the directions agreed upon, to the patient or his friends, as well as any opinions which it may be thought proper to express. But no statement or discussion of it should take place before the patient or his friends, except in the presence of all the faculty attending, and by their common consent; and no opinions or prognostications should be delivered, which are not the result of previous deliberation and concurrence.

§ 4. In consultations, the physician in attendance should deliver his opinion first; and where there are several consulting, they should deliver their opinions in the order in which they have been called in. No decision, however, should restrain the attending physician from making such variations in the mode of treatment, as any subsequent unexpected change in the character of the case, may demand. But such variation, and the reasons for it, ought to be carefully detailed at

the next meeting in consultation. The same privilege, belongs also to the consulting physician, if he is sent for in an emergency, when the regular attendant is out of the way, and similar explanations must be made by him at the next consultation.

§ 5. The utmost punctuality should be observed in the visits of physicians when they are to hold consultation together, and this is generally practicable, for society has been considerate enough to allow the plea of a professional engagement to take precedence of all others, and to be an ample reason for the relinquishment of any present occupation. But, as professional engagements may sometimes interfere and delay one of the parties, the physician who first arrives, should wait for his associate a reasonable period, after which, the consultation should be considered as postponed to a new appointment. If it be the attending physician who is present, he will of course see the patient and prescribe; but if it be the consulting one, he should retire, except in case of emergency, or when he has been called from a considerable distance, in which latter case, he may examine the patient, and give his opinion in writing and under seal, to be delivered to his associate.

§ 6. In consultations, theoretical discussions should be avoided, as occasioning perplexity and loss of time. For there may be such diversity of opinion concerning speculative points, with perfect agreement in those modes of practice which are founded, not on hypothesis, but on experience and observation.

§ 7. All discussions in consultation, should be held as secret and confidential. Neither by words nor manner, should any of the parties to a consultation, assert or insinuate, that any part of the treatment pursued, did not receive his assent. The responsibility must be equally divided between the medical attendants,—they must equally share the credit of success, as well as the blame of failure.

§ 8. Should an irreconcilable diversity of opinion occur when several physicians are called upon to consult together, the opinion of the majority should be considered as decisive; but if the numbers be equal on each side then the decision should rest with the attending physician. It moreover, sometimes happens, that two physicians cannot agree in their views of the nature of a case, and the treatment to be pursued. This is a circumstance much to be deplored, and should always be avoided if possible, by mutual concessions, as far as they can be justified by a conscientious regard for the dictates of judgement. But, in the event of its occurrence, a third physician should, if practicable, be called to act as umpire; and, if circumstances prevent the adoption of this course, it must be left to the patient to select the physician in whom he is most willing to confide. But, as every physician relies on the rectitude of his judgement, he should, when left in the minority, politely and consistently retire from any further deliberation in the consultation, or participation in the management of the case.

§ 9. As circumstances sometimes occur to render a special consultation desirable, when the continued attendance of two physicians might be objectionable to the patient, the member of the faculty whose assistance is required in such cases, should sedulously guard against

all future unsolicited attendance. As such consultations require an extraordinary portion both of time and attention, at least a double honorarium may be reasonably expected.

§ 10. A physician who is called upon to consult, should observe the most honorable and scrupulous regard for the character and standing of the practitioner in attendance; the practice of the latter, if necessary, should be justified as far as it can be, consistently with a conscientious regard for truth, and no hint or insinuation should be thrown out which could impair the confidence reposed in him, or affect his reputation. The consulting physician should always carefully refrain from any of those extraordinary attentions or assiduities, which are too often practiced by the dishonest for the base purpose of gaining applause, or ingratiating themselves into the favor of families and individuals.

#### ART. V.—*Duties of Physicians in cases of interference.*

§ 1. Medicine is a liberal profession, and those admitted into its ranks should found their expectations of practice upon the extent of their qualifications, not on intrigue or artifice.

§ 2. A physician, in his intercourse with a patient under the care of another practitioner, should observe the strictest caution and reserve. No meddling inquiries should be made; no disingenuous hints given relative to the nature and treatment of his disorder; nor any course of conduct pursued that may directly or indirectly tend to diminish the trust reposed in the physician employed.

§ 3. The same circumspection and reserve should be observed when, from motives of business or friendship, a physician is prompted to visit an individual who is under the direction of another practitioner. Indeed, such visits should be avoided, except under peculiar circumstances; and when they are made, no particular inquiries should be instituted relative to the nature of the disease, or the remedies employed, but the topics of conversation should be as foreign to the case as circumstances will admit.

§ 4. A physician ought not to take charge of, or prescribe for a patient who has recently been under the care of another member of the faculty in the same illness, except in cases of sudden emergency, or in consultation with the physician previously in attendance, or when the latter has relinquished the case, or been regularly notified that his services are no longer desired. Under such circumstances, no unjust and illiberal insinuation should be thrown out in relation to the conduct or practice previously pursued, which should be justified as far as candor, and regard for truth and probity will permit; for it often happens, that patients become dissatisfied when they do not experience immediate relief, and, as many diseases are naturally protracted, the want of success, in the first stage of treatment, affords no evidence of a lack of professional knowledge and skill.

§ 5. When a physician is called to an urgent case, because the family attendant is not at hand, he ought, unless his assistance in consultation be desired, to resign the care of the patient to the latter immediately on his arrival.



§ 6. It often happens, in cases of sudden illness, or of recent accidents and injuries, owing to the alarm and anxiety of friends, that a number of physicians are simultaneously sent for. Under these circumstances, courtesy should assign the patient to the first who arrives, who should select from those present, any additional assistance that he may deem necessary. In all such cases, however, the practitioner who officiates, should request the family physician, if there be one, to be called, and, unless his further attendance be requested, should, resign the case to the latter on his arrival.

§ 7. When a physician is called to the patient of another practitioner, in consequence of the sickness or absence of the latter, he ought, on the return or recovery of the regular attendant, and with the consent of the patient, to surrender the case.

§ 8. A physician, when visiting a sick person in the country, may be desired to see a neighboring patient who is under the regular direction of another physician, in consequence of some sudden change or aggravation of symptoms. The conduct to be pursued on such an occasion is to give advice adapted to present circumstances; to interfere no farther than is absolutely necessary with the general plan of treatment; to assume no other direction unless it be expressly desired; and, in the last case, to request an immediate consultation with the practitioner previously employed.

§ 9. A wealthy physician should not give advice gratis to the affluent; because his doing so is an injury to his professional brethren. The office of a physician can never be supported as an exclusively beneficent one; and it is defrauding, in some degree, the common funds for its support, when fees are dispensed with which might justly be claimed.

§ 10. When a physician who has been engaged to attend a case of midwifery, is absent, and another is sent for, if delivery is accomplished during the attendance of the latter, he is entitled to the fee, but should resign the patient to the practitioner first engaged.

## ART. VI — *Of differences between Physicians.*

§ 1. Diversity of opinion, and opposition of interest, may, in the medical, as in other professions, sometimes occasion controversy and even contention. Whenever such cases unfortunately occur and cannot be immediately terminated, they should be referred to the arbitration of a sufficient number of physicians, or a court-medical.

§ 2. As peculiar reserve must be maintained by physicians towards the public, in regard to professional matters, and as there exist numerous points in medical ethics and etiquette through which the feelings of medical men may be painfully assailed in their intercourse with each other, and which cannot be understood or appreciated by general society, neither the subject matter of such differences nor the adjudication of the arbitrators should be made public, as publicity in a case of this nature may be personally injurious to the individuals concerned, and can hardly fail to bring discredit on the faculty.

## ART. VII.—*Of pecuniary acknowledgements.*

Some general rules should be adopted by the faculty, in every town or district, relative to pecuniary acknowledgements from their patients; and it should be deemed a point of honor to adhere to these rules with as much uniformity as varying circumstances will admit.

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## CHAPTER III.

### OF THE DUTIES OF THE PROFESSION TO THE PUBLIC, AND OF THE OBLIGATIONS OF THE PUBLIC TO THE PROFESSION.

#### ART. I.—*Duties of the profession to the public.*

§ 1. As good citizens, it is the duty of physicians to be ever vigilant for the welfare of the community, and to bear their part in sustaining its institutions and burdens; they should also be ever ready to give counsel to the public in relation to matters especially appertaining to their profession, as on subjects of medical police, public hygiene and legal medicine. It is their province to enlighten the public in regard to quarantine regulations,—the location, arrangement, and dietaries of hospitals, asylums, schools, prisons, and similar institutions,—in relation to the medical police of towns, as drainage, ventilation, &c.,—and in regard to measures for the prevention of epidemic and contagious diseases; and when pestilence prevails, it is their duty to face the danger, and to continue their labors for the alleviation of the suffering, even at the jeopardy of their own lives.

§ 2. Medical men should also be always ready, when called on by the legally constituted authorities, to enlighten coroners' inquests, and courts of justice, on subjects strictly medical,—such as involve questions relating to sanity, legitimacy, murder by poisons or other violent means, and in regard to the various other subjects embraced in the science of Medical Jurisprudence. But in these cases, and especially where they are required to make a post-mortem examination, it is just, in consequence of the time, labor and skill required, and the responsibility and risk they incur, that the public should award them a proper honorarium.

§ 3. There is no profession, by the members of which eleemosynary services are more liberally dispensed than the medical, but justice requires that some limits should be placed to the performance of such good offices. Poverty, professional brotherhood, and certain of the public duties referred to in the first section of this chapter, should always be recognized as presenting valid claims for gratuitous services; but neither institutions endowed by the public or by rich individuals, societies for mutual benefit for the insurance of lives or for analogous purposes, nor any profession or occupation, can be admitted to possess such privilege. Nor can it be justly expected of physicians to furnish certificates of inability to serve on juries, to perform militia duty, or to testify to the state of health of persons wishing to insure their lives, obtain pensions, or the like, without a pecuniary acknowledgment. But to individuals in indigent circumstances, such professional services should always be cheerfully and freely accorded.

§ 4. It is the duty of physicians, who are frequent witnesses of the enormities committed by quackery, and the injury to health and even destruction of life caused by quack medicines, to enlighten the public on these subjects, to expose the injuries sustained by the unwary from the devices and pretensions of artful empirics and imposters. Physicians ought to use all the influence which they may possess, as professors in Colleges of Pharmacy, and by exercising their option in regard to the shops to which their prescriptions shall be sent, to discourage druggists and apothecaries from vending quack or secret medicines, or from being in any way engaged in their manufacture and sale.

ART. II.— *Obligations of the public to physicians.*

§ 1. The benefits accruing to the public, directly and indirectly, from the active and unwearied beneficence of the profession, are so numerous and important, that physicians are justly entitled to the utmost consideration and respect from the community. The public ought likewise to entertain a just appreciation of medical qualifications;—to make a proper discrimination between true science and the assumptions of ignorance and empiricism,—to afford every encouragement and facility for the acquisition of medical education,—and no longer to allow the statute books to exhibit the anomaly of exacting knowledge from physicians, under liability to heavy penalties, and of making them obnoxious to punishment for resorting to the only means of obtaining it.



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DELIVERED TO THE CLARK COUNTY MEDICAL SOCIETY, BY THE PRESIDENT,  
F. R. PAYNE, M. D., AT MARSHALL, ILLINOIS, ON THE 20th DAY  
OF FEB., 1867. PUBLISHED BY REQUEST OF THE SOCIETY.

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GENTLEMEN.—

As many who are now present, were not here when this society was organized, it is probably expected that I make a few explanatory remarks. This is the first effort ever made to establish a medical society in Clark County, and we are extremely desirous that we so arrange and perfect the organization, that it will be one of the permanent institutions of the county. In order to do this, it will be necessary for each member to cultivate social and professional duties. We should all strive to subdue those vices, which injuriously affect the relationship of man to God, his neighbor or himself. Unprofessional and irrelevant conduct should be strictly avoided by every member, private piques and difficulties, it is hoped, will never enter our society. It is expected that we will all avoid slander, backbiting, and everything that tends to arouse the evil passions. We meet for a more noble purpose; the improvement of our minds in regard to the ascertained facts of our profession. When all of these scattered facts are collected together, whether they be as old as history, or as young as to-day, then will our profession occupy a much higher position, even than it now does. Every physician ought to deeply feel the greatness of his mission, and the immense responsibility which he incurs in the discharge of professional duties.

We trust all will fully unite in the present effort to collect practical facts for the mutual benefit of the members of this society. It seems to be a proposition fully established, that medical doctrines and theories are only explanations of assumed facts, and consequently are not reliable. In the practical departments of our profession, assumed or unascertained phenomena and relationship, cannot form a legitimate element of medical science. Our society, as we understand it, is organized for the purpose of collecting all facts and observations of each member, so that we may mutually profit by this combined experience. It matters not how well we may understand the location, seat, and pathology of disease, we are not able to deduce a remedy. We may be familiar with the anatomical structure of every organ in the body, and physiologically understand their healthy functions; we may also be familiar with the chemical elements that may enter into the composition of every remedial agent, but still without experience,

or a practical test, we cannot select a remedy that will remove the abnormal action and thus restore healthy physiological action. The science of life in all instances, and in all of its multitudinous departments is entirely independent of these hypothetical explanations. It is a lamentable fact, that these theories have pervaded, and too often ruled, the practical departments of our profession, and have, in many instances been the instruments of positive evil, when the object was the erection of an engine of good. When we look back upon the history of the profession, and witness the innumerable theories and hypotheses which were dignified with the title of established truths, we can readily comprehend why the practical departments of medicine have not equaled the anatomical, physiological and pathological knowledge.

We can now only refer to some of these theories. We find the vitalists, chemicalists, mechanicalists, Cullenism, Brownism, Broussaisism, also a host of pathies, such as hydropathy and homœopathy. — This is only a few of the long heterogeneous list of medical hypotheses. Hippocrates now occupies a pre-eminent position in the profession, yet he lived when it was in its infancy. Why was it that he secured so much regard among medical men? The reason is obvious. — He had no general doctrine or theory of disease, and all of his many contributions to our science, were based on experience and observation. Cullen contended that the cold stage of a febrile disease was the cause of all subsequent phenomena. He assumed that the primary cause was debility of the brain, caused by the action of epidemic, or any other poison. This weakened action resulted in functional derangement of all of the organs of the body, and more especially the action of the heart and arteries, thus causing spasm of the vessels. His therapeutics were, of course, based upon this hypothesis, and were, by prejudice, or a love of his own peculiar dogmas, leading him into fatal practical errors. Surely the wildest dreamer in pathology, and the most superficial *a priori* reasoner, could not have collected a more perfect bundle of assumption and incongruities.

I have spoken of homœopathy, and freely admit, that this is one of the most successful and seductive humbugs of the nineteenth century, and in fact, of any age. The disreputable part of this theory or pathy, consists in the practical deception used by its votaries in proclaiming to the public that they use infinitesimal doses, while at the same time, in all grave diseases, they use rational doses of medicine. Let any man of this school locate in this, or any intelligent community, and strictly follow out their theory or doctrine; let them put twenty drops of laudanum in one pint of water, and then give ten drops of the mixture every fifteen minutes in a case of colic, how long would it require to secure, and justly merit, the scorn and contempt of the community? I have several letters in my possession from a leading and learned homœopath, now residing in Albany N. Y., who has the honesty to state that he does not confine himself to the infinitesimal doses of his school. I am now ready to assert and let honest men decide, that no man, it matters not how great his learning, or how well he may be informed in regard to the principles of medicine, he will totally fail in any community, if he strictly adheres to the teachings and doctrines of that school of medicine. Does any man with a thoughtful of brains, suppose that one grain of quinine dissolved



in one pint of water, and then give twenty drops every fifteen minutes, would interrupt a congestive chill? This is the theory, but all men who practice it with success, use rational doses. They give for chills, arsenic; and all of their remedies are the most active, and in a concentrated form, consequently their doses seem small, when in reality, they contain equally as much as those of a regular practitioner.

The theory of homeopathy is equally as absurd and ridiculous as that of the *laxum* and *strictum* of the methodists, or the spasms of Cullen. This theory will soon be borne to that ancient vault, where all false doctrines, pathies and isms rest. No man, or set of men, with these hypothetical crotches in their brains can be trusted, and especially when life is placed in jeopardy by their folly. A belief in any theory, not based on experience and observation, disqualifies the physician who holds it, and renders it impossible for him to be a faithful observer of disease. Our society was organized for the purpose of presenting the practical facts and experience of each member, that we may all profit thereby. During the last few years we have had, in our county, a visitation of that terrible epidemic, denominated Cerebro Spinal Meningitis, and it is hoped, that we may, through this society, so compare notes, that if we are again called to treat this malady, we will be better prepared to arrive at more correct views in regard to its pathology and treatment.

In presenting facts, and in truth through all the various professional duties we are called upon to perform, we should cherish feelings of deep responsibility; we ought to remember that we are the arbiters of life and death, —the guardians of our race, from birth, through all the perils of infancy, youth, manhood and old age. The true physician is the first and last friend of humanity, —the soother alike of the entrance and exit of life. This being true, how important it is, that we secure a truthful and reliable presentation of the combined experience of all the members of the profession. The sphere of a medical man is limited, he can attend to but few patients, consequently, it is cruel and unprofessional for any physician to hold in secrecy, a remedy which he may have, by experience and through test, found to be possessed of superior value in the cure of any disease. Had Dr. Jenner locked up in his own bosom, his invaluable discovery of the protecting virtue of vaccine virus, he would have justly merited the scorn and contempt of all good men. So with a host of others who have made valuable contributions to our science. Those men, who have by toil and perseverance, discovered important anatomical, pathological and practical truths, are justly entitled to, and will for all time to come, receive the lasting gratitude of our race. They will be held in kind remembrance as long as intelligence constitutes an element in the human family.

Every medical man should cultivate a spirit of sincerity and truth. The public can generally judge with tolerable accuracy the merit of members of other professions, but they are almost totally incapable of arriving at correct opinions in regard to the knowledge and ability of medical men. This enables unprincipled men, in many instances, to practice upon public credulity. They will boast of their newly discovered theory, by the aid of which, nearly all the ills to which flesh is heir, may with ease and rapidity be cured. They will boast of some secret and vaunted nostrum, and claim that it possesses matchless curative

powers,—send out flaming hand-bills, filled with certificates extorted from the honest but unsuspecting public, and thus rob the community of their money and degrade the profession.

As a rule we may all set it down as a fixed fact, that all journeymen or traveling doctors are imposters. Their object is not to relieve suffering humanity, but to fill their coffers through the instrumentality of deception and fraud.

One of the grand objects of this society is to unite all of the medical men of the county, and by a combined effort arrest, if possible, the inroads of quacks and imposters.

It is hoped that each member will carefully study the just, humane and noble principles embodied in the American Code of Medical Ethics, which has been adopted by the society, and published with the Constitution and By-Laws. In this way we can properly understand each other, and by a united effort accomplish much good. Every medical man should be strongly imbued with a sense of moral obligation. It is expected and demanded that all physicians be governed by justice, morality, and the pure principles of honor. The medical man is received into the bosom of private families, and oftentimes intrusted with matters of such a nature that if disclosed, would frequently plunge the parents, children, and relations into the most bitter and distressing agony. The physician who stands on the street corners and public places amusing the vulgar with a recital of the private diseases of his patients, degrades himself and the profession. Every man who engages in the practice of medicine, should observe in the sick room prudence, kindness, and delicacy of feeling, and never permit the privacy of the family circle to be dragged into public conversation. While these obligations ought to be held sacred by every physician, he is in return justly entitled to consideration and respect from his patients, and the community. This duty on the part of patients amounts to more than the ordinary civilities of life. The entire time of the medical man is spent for the benefit of the afflicted, consequently he is entitled to pecuniary reward. Many entertain the idea that the charges of physicians are exorbitant; but, we assert, and have no fears of successful contradiction, that there is no class of men who perform as great an amount of gratuitous labor as the physician, neither are there any who are so inadequately remunerated for their labor. In proof of this assertion, look for a moment at the financial condition of the families of Clark county physicians. In no instance where their time was exclusively devoted to the practice of medicine have they more than barely made a living, and when death closed their labors, their families are left almost destitute. The truth is patent to all, that medical men in this country, live from hand to mouth, and generally their liabilities exceed their income. The reason of this is, that half, and oftentimes three-fourths, utterly refuse or neglect to pay their bills.—The true physician, who loves his profession and feels an interest in the welfare of his patients, has not the time to engage in speculations and other employments which would add to his income. When not engaged in the rounds of his professional calls, he ought to be collecting and storing away in his mind the recorded experiences and observations of those who have gone before.

In the sixteenth and part of the seventeenth centuries doctors made no charge, but left the amount of their fees entirely to the generosity



of the patient. Dr. Radcliff, in the sixteenth century, cured Bentinck of diarrhoea and congestion of the brain. For the service he was presented with 500 guineas. The physicians of our day often cure such cases, for which they charge \$1, and wait ten years for the pay. Dr. Radcliff cured the princess of Denmark's son of a *worm fit*, when the child was three years old. For this great feat Queen Mary sent him 1000 guineas, and a diamond ring worth 1200 guineas. There is not an old practioner in this society who has not cured similar cases for two dollars.

In these days when men are very sick; "God and the doctor, they alike adore." But only when in danger; when health is restored, God is forgotten, and the doctor abused for asking compensation. It is true we have many noble exceptions to this charge of ingratitude on the part of patients.

The receipt of Bulleyn's, and a host of others, for the cure of disease, for which they received enormous fees, are truly laughable.—Roasted mice, snails, rats, bats, egg shells, and bones, compounded into syrups, plasters, and pills, were proclaimed as certain cures for Colic, Rheumatism, Cancer, Piles, and in fact all diseases to which flesh is heir. For these foolish prescriptions, from ten to one thousand guineas were freely given by the patient. Some of the men of this age ought to have lived in the days of Radcliff, Phears, Sherley, Sloane, Garth, Littson, and a host of others. All the true physicians left their reward to be measured by the gratitude and justice of the patient. They preferred a system of gratuity to that of legal right. Under that system of finance we leave for the members of this society to determine how much they would realize for their labor annually.—We will briefly refer to one more point and then close these desultory remarks, which have been extended beyond the limits first intended.

It is the duty of the public to justly appreciate medical qualifications and make, as far as possible, a true discrimination between true science and the sickening boasting of the ignorant empiric. Every facility possible, legal, and otherwise should be encouraged, which tends to facilitate the acquisition of medical knowledge and education. Our statute books in nearly all of the States contain provisions imperatively demanding a certain amount of anatomical knowledge, and fix heavy fines and even imprisonment for a failure on the part of the physician, who does not possess that information. At the same time another statute law will punish with the most severe and degrading penalties, a resort to the only means on earth by which they can gain the information thus demanded by the law.

We respectfully submit these remarks to the consideration of the society, and take this opportunity of expressing to you all, my sincere thanks for the honor conferred by electing me president. It shall be my aim and desire to discharge the duties of the office with impartiality.





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